X\$ 9=

X42=

+140=

ADDIT. FEE

TOTAL

X\$18=

XR4-

+280=

ADDIT. FEE

TOTAL

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OR

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OR

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Total

Independent

FORM PTO-475 (Rev. 8/01)

Minus

Minus

" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

"If the "Highest Number Previously Paid For" IN THIS SPACE is tess than 3, enter '3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.